

TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

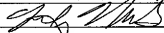
Application Number	09/930,582
Filing Date	August 15, 2001
Confirmation Number	3302
Inventor(s)	DENYER et al.
Group Art Unit	3734
Examiner	Mendoza, M.
Attorney Docket No.	00-41 C1 RCE 2
Total Number of Pages in This Submission:	20

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form (submit in duplicate)	<input type="checkbox"/> Assignment Papers	<input checked="" type="checkbox"/> Issue fee Transmittal Form PTOL-85(b) + (c) and Cover Sheet
<input type="checkbox"/> Fee Attached \$ <input type="text"/>	<input type="checkbox"/> Cover Sheet	<input type="checkbox"/> After Allowance Communication to Group
Check No.: <input type="text"/>	<input type="checkbox"/> Drawing Change Authorization Request and Amended Figure(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Request for Return of PTO-1449 Forms	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to the Commissioner	<input type="checkbox"/> Request for Continued Examination (RCE)
<input type="checkbox"/> Affidavits / Declaration(s)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Request Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Address	<input checked="" type="checkbox"/> Small Entity Statement
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer(s)	<input type="checkbox"/> Request for Refund
<input type="checkbox"/> Form PTO-1449	<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Response to Missing Parts / Incomplete Application
<input type="checkbox"/> Cited References	<input type="checkbox"/> Combined Declaration and Power of Attorney	<input type="checkbox"/> Supplemental Application Data Sheet
<input type="checkbox"/> Search report		
<input checked="" type="checkbox"/> Drawing(s): Number of Pages <u>13</u> Number of Figs. <u>19</u> and cover sheet	<input type="checkbox"/> Other Enclosure(s): _____	
<input checked="" type="checkbox"/> Formal		
<input type="checkbox"/> Informal		

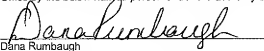
Current Due Date: June 9, 2008

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Individual and Company	Timothy A. Nathan, Reg. No. 44,256 RESPIRONICS, Inc., 1010 Murry Ridge Lane, Murrysville PA, 15668
Signature	
Date	May 27, 2008

CERTIFICATE OF AUTHORIZATION/ELECTRONIC FILING

This paper (along with any referred to as being attached or enclosed) is being electronically filed with the U.S. Patent and Trademark Office by the below-named person under the authority of the above-signed agent/attorney of record on May 27, 2008.


Dana Rumbaugh

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re PATENT APPLICATION of

Inventor : DENYER et al.
Appln. No. : 09/930,582
Conf. No.: : 3302
Filed: : August 15, 2002
Title: : CONTROLLING DRUG DELIVERY APPARATUS
Group Art Unit : 3734
Examiner : Mendoza, M.
Docket No. : 00-41 C1 RCE 2

* * * * *

May 27, 2008

**PAYMENT OF ISSUE FEE AND FILING OF FORMAL
DRAWINGS AFTER ALLOWANCE**

Hon. Commissioner of Patents
and Trademarks
Washington, D.C. 20231


Sir:

Enclosed herewith are the following for filing in connection with the above-identified U.S. patent application:

- 1) Transmittal Form (1 page);
- 2) A completed Issue Fee Transmittal Form - PTOL 85(b)(1 page);
- 3) Notification of Loss of Small Entity Status Pursuant to 37 C.F.R. § 1.27(g)(2) and Payment of Issue Fee (2 pages);
- 4) Submission of Formal Drawings Form (1 page); and
- 5) Formal Drawings (13 pages, Figures 1-9).

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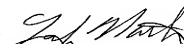

Dana Rumbaugh

DENYER et al. -- Appln. No.: 09/930,582

Authorization to charge the indicated fees to the Applicants' credit card have been provided herewith. The Commissioner is authorized to charge any deficiency in the indicated fees or credit any overpayment to Deposit Account No. 50-0558.

Respectfully submitted,

By



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